

AO 239 (Rev. 01/15) Application to Proceed in District Court Without Prepaying Fees or Costs (Long Form)

Page 1 of 5 AO 239 (Rev. 01/15) Application to Proceed in District Court Without Prepaying Fees or Costs (Long Form)

UNITED STATES DISTRICT COURT

for the

Western District of Michigan District of

Scott Probst, Johnny Aaron, Dennis Davis, Ervin LaMie)

Plaintiff/Petitioner)

v.)

Civil Action No.

1:24-mc-105

Phillip J. Green

U.S. Magistrate Judge

Karen D. Buie Muskegon County Clerk in official) capacity,
and Lori Hayes, Elections Coordinator in Defendant/Respondent)APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS
(Long Form)

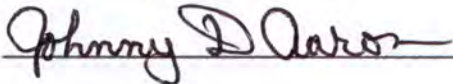
Affidavit in Support of the Application

Instructions

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested. I declare under penalty of perjury that the information below is true and understand that a false statement may result in a dismissal of my claims.

Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Signed:



Date:

9-15-2024

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	Average monthly income amount during the past 12 months		Income amount expected next month	
	You	Spouse	You	Spouse
Employment	\$ 0.00	\$ 0.00	\$ 0.00	\$
Self-employment	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Income from real property (such as rental income)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Interest and dividends	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

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Gifts	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Alimony	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Child support	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

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Retirement (such as social security, pensions, annuities, insurance)	\$ 1,137.00	\$ 0.00	\$ 0.00	\$ 0.00
Disability (such as social security, insurance payments)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Unemployment payments	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Public-assistance (such as welfare)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Other (specify):	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Total monthly income:	\$ 1,137.00	\$ 0.00	\$ 0.00	\$ 0.00

2. List your employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
n/a			\$
			\$

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
n/a			\$
			\$
			\$

4. How much cash do you and your spouse have? \$

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your spouse has
		0 \$	0.00

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		\$	\$
		\$	\$

If you are a prisoner, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

Assets owned by you or your spouse	
Home (Value)	\$
Other real estate (Value)	\$
Motor vehicle #1 (Value) JUNK	\$ 250
Make and year: 2001 FORD	
Model: Pickup	
Registration #: 1PMZU77E01UB71438	
Motor vehicle #2 (Value) V	\$ 2200
Make and year: JEEP 2002	
Model: GRAND CHEROKEE	
Registration 1J4GW48S92C298697	
Other assets (Value)	\$ 0.00
Other assets (Value)	\$ 0.00

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
	\$ 0.00	\$ 0.00
	\$ 0.00	\$ 0.00

AO 239 (Rev. 01/15) Application to Proceed in District Court Without Prepaying Fees or Costs (Long Form)

	\$	0.00	\$	0.00
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7. State the persons who rely on you or your spouse for support.

Name (or, if under 18, initials only)	Relationship	Age
n/a		

8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

	You	Your spouse
Rent or home-mortgage payment <i>(including lot rented for mobile home)</i> Are real estate taxes included? ' Yes ' No Is property insurance included? ' Yes <input checked="" type="checkbox"/> No	\$ 0.00	\$ 0.00
Utilities <i>(electricity, heating fuel, water, sewer, and telephone)</i>	\$ 125.00	\$ 0.00
Home maintenance <i>(repairs and upkeep)</i>	\$.00	\$ 0.00
Food	\$ 280.00	\$ 0.00
Clothing	\$ 50.00	\$ 0.00
Laundry and dry-cleaning	\$ 55.00	\$ 0.00
Medical and dental expenses	\$ 0.00	\$ 0.00
Transportation <i>(not including motor vehicle payments)</i>	\$ 295.00	\$ 0.00
Recreation, entertainment, newspapers, magazines, etc.	\$ 35.00	\$ 0.00
Insurance <i>(not deducted from wages or included in mortgage payments)</i>		
Homeowner's or renter's:	\$ 0.00	\$ 0.00
Life:	\$ 0.00	\$ 0.00
Health:	\$ 0.00	\$ 0.00
Motor vehicle:	\$ 0000	\$ 0.00
Other:	\$ 325.00	\$ 0.00

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Taxes (not deducted from wages or included in mortgage payments) (specify):	\$ 0.00	\$ 0.00
Installment payments		
Motor vehicle:	\$ 0.00	\$ 0.00
Credit card (name):	\$ 0.00	\$ 0.00
Department store (name):	\$ 0.00	\$ 0.00
Other:	\$ 0.00	\$ 0.00
Alimony, maintenance, and support paid to others	\$ 0.00	\$ 0.00
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0.00	\$ 0.00
Other (specify):	\$ 00	\$ 0.00
Total monthly expenses:	\$ 1,192.00	\$ 0.00

9. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?

' Yes '✓ No If yes, describe on an attached sheet.

10. Have you spent — or will you be spending — any money for expenses or attorney fees in conjunction with this _____ lawsuit? ' Yes '✓ No

If yes, how much? \$ _____

11. Provide any other information that will help explain why you cannot pay the costs of these proceedings. Single and on a fixed income no other income projected.

12. Identify the city and state of your legal residence. Muskegon Michigan

Your daytime phone number: (231) 740-8671 Your age: _____

73 Your years of schooling: _____ 12

UNITED STATES DISTRICT COURT

for the

Western District of Michigan _____ District of _____

Scott Probst, Johnny Aaron, Dennis Davis, Ervin LaMie)

1:24-mc-105

Phillip J. Green

U.S. Magistrate Judge

Plaintiff/Petitioner)

v.)

Civil Action No.

Karen D. Buie Muskegon County Clerk in official) capacity,
and Lori Hayes, Elections Coordinator in Defendant/Respondent)APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS
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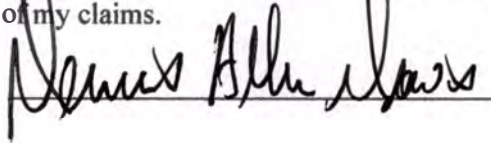
Affidavit in Support of the Application

Instructions

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested. I declare under penalty of perjury that the information below is true and understand that a false statement may result in a dismissal of my claims.

Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Signed:



Date:

9-15-24

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	Average monthly income amount during the past 12 months		Income amount expected next month	
	You	Spouse	You	Spouse
Employment	\$ 0.00	\$ 0.00	\$ 0.00	\$
Self-employment	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Income from real property (such as rental income)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Interest and dividends	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

Gifts	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Alimony	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Child support	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

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Retirement (such as social security, pensions, annuities, insurance)	\$ 919.00	\$ 0.00	\$ 0.00	\$ 0.00
Disability (such as social security, insurance payments)	\$ 755.00	\$ 0.00	\$ 0.00	\$ 0.00
Unemployment payments	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Public-assistance (such as welfare)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Other (specify):	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Total monthly income:	\$ 1,674.00	\$ 0.00	\$ 0.00	\$ 0.00

2. List your employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
n/a			\$
			\$

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
n/a			\$
			\$
			\$

4. How much cash do you and your spouse have? \$

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your spouse has
5/3 bank	checking	\$ 1,200.00	\$ 0.00
		\$	\$

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		\$	\$
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If you are a prisoner, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

Assets owned by you or your spouse	
Home (Value)	\$
Other real estate (Value)	\$
Motor vehicle #1 (Value)	\$ 4,500.00
Make and year: 1941 Chevy	
Model: Pickup	
Registration #: T219037	
Motor vehicle #2 (Value)	\$ 3,000.00
Make and year: 2012 Chevy	
Model: CRUZ	
Registration #: 1G1PE5SC1C7262604	
Other assets (Value)	\$ 0.00
Other assets (Value)	\$ 0.00

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
	\$ 0.00	\$ 0.00
	\$ 0.00	\$ 0.00
	\$ 0.00	\$ 0.00

7. State the persons who rely on you or your spouse for support.

Name (or, if under 18, initials only)	Relationship	Age
n/a		

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8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

	You	Your spouse
Rent or home-mortgage payment <i>(including lot rented for mobile home)</i> Are real estate taxes included? ' Yes ' No Is <input checked="" type="checkbox"/> property insurance included? ' Yes <input checked="" type="checkbox"/> ' No	\$ 0.00	\$ 0.00
Utilities <i>(electricity, heating fuel, water, sewer, and telephone)</i>	\$ 125.00	\$ 0.00
Home maintenance <i>(repairs and upkeep)</i>	\$ 135.00	\$ 0.00
Food	\$ 280.00	\$ 0.00
Clothing	\$ 50.00	\$ 0.00
Laundry and dry-cleaning	\$ 35.00	\$ 0.00
Medical and dental expenses	\$ 0.00	\$ 0.00
Transportation <i>(not including motor vehicle payments)</i>	\$ 225.00	\$ 0.00
Recreation, entertainment, newspapers, magazines, etc.	\$ 35.00	\$ 0.00
Insurance <i>(not deducted from wages or included in mortgage payments)</i>		
Homeowner's or renter's:	\$ 0.00	\$ 0.00
Life:	\$ 0.00	\$ 0.00
Health:	\$ 0.00	\$ 0.00
Motor vehicle:	\$ 62.00	\$ 0.00
Other:	\$ 0.00	\$ 0.00
Taxes <i>(not deducted from wages or included in mortgage payments) (specify):</i>	\$ 0.00	\$ 0.00
Installment payments		
Motor vehicle:	\$ 0.00	\$ 0.00
Credit card <i>(name):</i>	\$ 0.00	\$ 0.00
Department store <i>(name):</i>	\$ 0.00	\$ 0.00

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Other:	\$	0.00	\$	0.00
Alimony, maintenance, and support paid to others	\$	0.00	\$	0.00
Regular expenses for operation of business, profession, or farm <i>(attach detailed statement)</i>	\$	0.00	\$	0.00
Other <i>(specify)</i> : fines	\$	30.00	\$	0.00
Total monthly expenses:		\$ 977.00	\$	0.00

9. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?

' Yes '✓ No If yes, describe on an attached sheet.

10. Have you spent — or will you be spending — any money for expenses or attorney fees in conjunction with this lawsuit? ' Yes '✓ No

If yes, how much? \$

11. Provide any other information that will help explain why you cannot pay the costs of these proceedings. Single and on a fixed income no other income projected.

12. Identify the city and state of your legal residence. Muskegon Michigan

Your daytime phone number: (231) 740-8671 Your age: _____

73 Your years of schooling: _____ 12

AO 239 (Rev. 01/15) Application to Proceed in District Court Without Prepaying Fees or Costs (Long Form)

UNITED STATES DISTRICT COURT

for the

Western District of Michigan

Scott Probst, Johnny Aaron, Dennis Davis.

Ervin LaMie

Plaintiff/Petitioner

v.

Karen D. Buie, Lori Hayes, official capacity

Defendant/Respondent

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Civil Action No.

1:24-mc-105**Phillip J. Green****U.S. Magistrate Judge**

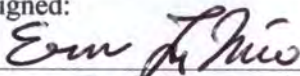
APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS

(Long Form)

Affidavit in Support of the Application

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested. I declare under penalty of perjury that the information below is true and understand that a false statement may result in dismissal of my claims.

Signed:



Instructions

Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Date: 9 / 15 / 2024

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	Average monthly income amount during the past 12 months		Income amount expected next month	
	You	Spouse	You	Spouse
Employment	0.00	\$ 0.00	\$ 0.00	0.00
Self-employment	0.00	\$ 0.00	\$ 0.00	0.00
Income from real property (such as rental income)	0.00	\$ 0.00	\$ 0.00	\$ 0.00
Interest and dividends	0.00	\$ 0.00	\$ 0.00	\$ 0.00
Gifts	0.00	\$ 0.00	\$ 0.00	\$ 0.00

AO 239 (Rev. 01/15) Application to Proceed in District Court Without Prepaying Fees or Costs (Long Form)

Alimony	0.00	\$	0.00	\$	0.00	\$	0.00
Child support	0.00		0.00	\$	0.00		0.00

Retirement (such as social security, pensions, annuities, insurance)	588.00	\$	0.00	\$	0.00		0.0
Disability (such as social security, insurance payments)	375.00	\$	0.00	\$	0.00		0.0
Unemployment payments	0.00	\$	0.00	\$	0.00		0.0
Public-assistance (such as welfare)	185.00	\$	0.00	\$	0.00		0.0
Other (specify):	0.00	\$	0.00	\$	0.00		0.0
Total monthly income:	1,148.00	\$	0.00	\$	0.00		0.00

2. List your employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly Pay
N/A			

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly Pay
N/A			

4. How much cash do you and your spouse have? \$ 85.00

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your s house has
Community Choice CU	Checking	\$ 125.00	\$

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Community Choice CU	Savings	0.00	\$

If you are a prisoner, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

Assets owned by you or your spouse	
Home (Value)	0.00
Other real estate (Value)	0.00
Motor vehicle #1 (Value)	800.00
Make and year: Chevy 1992	
Model: G30 Motor Home	
Registration cant find title	
Motor vehicle #2 (Value)	0.00
Make and year:	
Model:	
Registration #:	
Other assets (Value) TOOLS	500.00
Other assets (Value)	0.00

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse	Amount owed to you	Amount owed to your spouse
none		
N/A		

AO 239 (Rev. 01/15) Application to Proceed in District Court Without Prepaying Fees or Costs (Long Form)

7. State the persons who rely on you or your spouse for support.

Name (or, if under 18, initials only)	Relationship	Age
N/A		

8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

	You	Your spouse
Rent or home-mortgage payment (including lot rented for mobile home)		
Are real estate taxes included? Yes No	0.00	\$ 0.00
Is property insurance included? Yes No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	325.00	0.00
Home maintenance (repairs and upkeep)	65.00	\$ 0.00
Food	350.00	\$ 0.00
Clothing	40.00	\$ 0.00
Laundry and dry-cleaning	75.00	\$ 0.00
Medical and dental expenses	0.00	\$ 0.00
Transportation (not including motor vehicle payments)	165.00	\$ 0.00
Recreation, entertainment, newspapers, magazines, etc.	60.00	\$ 0.00
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's: N/A	0.00	\$ 0.00
Life: N/A	0.00	\$ 0.00
Health: N/A	0.00	\$ 0.00
Motor vehicle: N/A	0.00	\$ 0.00
Other: N/A	0.00	\$ 0.00

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Taxes (not deducted from wages or included in mortgage payments) (specify):		0.00
Installment payments		
Motor vehicle:	0.00	\$ 0.00
Credit card (name): pay pal	45.00	0.00
Department store (name):	0.00	\$ 0.00
Other:	0.00	\$ 0.00
Alimony, maintenance, and support paid to others	0.00	0.00

Regular expenses for operation of business, profession, or farm (attach detailed statement)	0.00	\$ 0.00
Other (specify):	0.00	\$ 0.00
Total monthly expenses:	1,125.00	\$ 0.00

9. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?
- ☐ Yes ☒ No If yes, describe on an attached sheet.
10. Have you spent — or will you be spending — any money for expenses or attorney fees in conjunction with this lawsuit? Yes ☒ No
- If yes, how much? \$
11. Provide any other information that will help explain why you cannot pay the costs of these proceedings. Divorced, limited income. I am legally disabled.
12. Identify the city and state of your legal residence. Muskegon Michigan

Your daytime phone number: (616) 834-8912 Your age: 65

Your years of schooling: 16

UNITED STATES DISTRICT COURT

for the
Western District of MichiganScott Probst, Johnny Aaron. Dennis Davis,
Ervin LaMie In Pro Se

Plaintiff/Petitioner

Civil Action No.

Karen D. Buie, Lori Hayes, official capacity

Defendant/Respondent

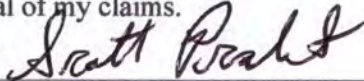
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Phillip J. Green
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Date: 09/15/2024

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	Average monthly income amount during the past 12 months		Income amount expected next month	
	You	Spouse	You	Spouse
Employment	0.00	\$ 0.00	\$ 0.00	0.00
Self-employment	0.00	0	0.00	0.00
Income from real property (such as rental income)	0.00	\$ 0.00	\$ 0.00	0.00
Interest and dividends	0.00	0.00	0.00	0.00
Gifts	0.00	0.00	0.00	0.00
Alimony	0.00	0.00	0.00	0.00
Child support	0.00	\$ 0.00	\$ 0.00	0.00

Gifts	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Alimony	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Child support	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

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Retirement (such as social security, pensions, annuities, insurance)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Disability (such as social security, insurance payments)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Unemployment payments	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Public-assistance (such as welfare)	\$ 299.00	\$ 0.00	\$ 0.00	\$ 0.00
Other (specify):	\$ 900.00	\$ 0.00	\$ 0.00	\$ 0.00
Total monthly income:	\$ 1,199.00	\$ 0.00	\$ 0.00	\$ 0.00

2. List your employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
Shape Corp	14600 172nd ave Grand Haven MI	Oct 2021 to Sept 2023	\$ 3,300.00
Port City Die Cast	2121 Latimer Drive Muskegon MI	Feburay 2020 to April 2020	\$ 2,040.00

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
N/A			\$
			\$
			\$

4. How much cash do you and your spouse have? \$ 145.00

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your spouse has
USBank	savings	\$ 0.50	\$ 0.00

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Wisely	savings	\$ 2.00	\$ 0.00
credit Karma	savings	\$ 0.22	\$ 0.00

If you are a prisoner, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

Assets owned by you or your spouse			
Home (Value)		\$	0.00
Other real estate (Value)		\$	0.00
Motor vehicle #1 (Value)		\$	6,800.00
Make and year: Chevy 2013			
Model: Silverado			
Registration #: 3GCPKSE72DG282931			
Motor vehicle #2 (Value)		\$	800.00
Make and year: 2001			
Model: HAULMARK 14ft Cargo Trailer			
Registration #: 16HCB12131H086384			
Other assets (Value)		\$	0.00
Other assets (Value)		\$	0.00

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
N/A	\$ 0.00	\$ 0.00
0	\$ 0.00	\$ 0.00

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8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

	You	Your spouse
Rent or home-mortgage payment <i>(including lot rented for mobile home)</i>		
Are real estate taxes included? ' Yes ' No	\$ 0.00	\$ 0.00
Is property insurance included? ' Yes ' No		
Utilities <i>(electricity, heating fuel, water, sewer, and telephone)</i>	\$ 490.00	\$ 0.00
Home maintenance <i>(repairs and upkeep)</i>	\$ 35.00	\$ 0.00
Food	\$ 300.00	\$ 0.00
Clothing	\$ 25.00	\$ 0.00
Laundry and dry-cleaning	\$ 25.00	\$ 0.00
Medical and dental expenses	\$ 0.00	\$ 0.00
Transportation <i>(not including motor vehicle payments)</i>	\$ 120.00	\$ 0.00
Recreation, entertainment, newspapers, magazines, etc.	\$ 25.00	\$ 0.00
Insurance <i>(not deducted from wages or included in mortgage payments)</i> Homeowner's		
or renter's: Auto Owners Insurance	\$ 0.00	\$ 0.00
Life:	\$ 0.00	\$ 0.00
Health:	\$ 0.00	\$ 0.00
Motor vehicle: Truck and Trailer	\$ 153.00	\$ 0.00
Other:	\$ 0.00	\$ 0.00
Taxes <i>(not deducted from wages or included in mortgage payments) (specify):</i>	\$ 0.00	\$ 0.00
Installment payments		
Motor vehicle:	\$ 0.00	\$ 0.00
Credit card <i>(name):</i> Surge Master card	\$ 50.00	\$ 0.00
Department store <i>(name):</i>	\$ 0.00	\$ 0.00

0	\$	0.00	\$	0.00
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7. State the persons who rely on you or your spouse for support.

Name (or, if under 18, initials only)	Relationship	Age
N/A	0	0
0	0	0
	0	0

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Other:	\$ 0.00	\$ 0.00
Alimony, maintenance, and support paid to others	\$ 0.00	\$ 0.00
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0.00	\$ 0.00
Other (specify):	\$ 0.00	\$ 0.00
Total monthly expenses:	\$ 1,223.00	\$ 0.00

9. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?

' Yes '✓ No If yes, describe on an attached sheet.

10. Have you spent — or will you be spending — any money for expenses or attorney fees in conjunction with this lawsuit? ' Yes '✓ No

If yes, how much? \$ 0.00

11. Provide any other information that will help explain why you cannot pay the costs of these proceedings. Debit cards for the unemployment it was US Bank when I recieved it and it ran out in february of 2024. The credit Karma debit card was for my income tax return and has virtual balance of zero. Wisely was for my paycheck while I was working and thats how I was paid final payment on September of 2023. OTHER INCOME: aproximatly 900 a month doing odd jobs to pay the bills. Income from friends and family doing the odd jobs. Bills are current to date. House forclose on bank has taken equity. NOT MARRIED/SINGLE
12. Identify the city and state of your legal residence. Muskegon, Michigan 49444

Your daytime phone number: (616) 638-7896 Your age: _____

49 Your years of schooling: 16